SUBMIT: COMPLETED AF Bayfield County
Planning and Zoning
PO Box 58
Washburn, WI 5489
(715) 373-6138

INSTRUCTIONS: No permits will be in Checks are made payable to: Bayfield DO NOT START CONSTRUCTION UNT

PLICATION, TAX	SESS!	T		
	APPLICATION FOR PERMIT		Permit #:	1886-0
R Depart.	BAYFIELD COUNTY, WISCONSIN		Date:	220
6	*			7.076
ğ			Amount Paid:	\$100 9-29-16
		-		
issued until all fees are paid.	are paid.		Refund:	
eld County Zoning Department.	eri ali pepantre unve premi region de particolo de la contro Zoning Dept.			

Proposed Structure Principal Structure (first structure on property)
ucture (first structure on property)
Dimensions X

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A FERMITWILL RESULT IN PRIVALES TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A FERMITWILL RESULT IN PRIVALES TO THE STARTING CONSTRUCTION WITHOUT A FERMITWILL RESULT IN PRIVALES TO THE STARTING CONSTRUCTION WITHOUT A FERMITWILL RESULT IN PRIVALES TO THE STARTING CONTROLLES TO T 1.8° 6

Authorized Agent:

Address to send permit

Owner(s):

(If there are Multiple

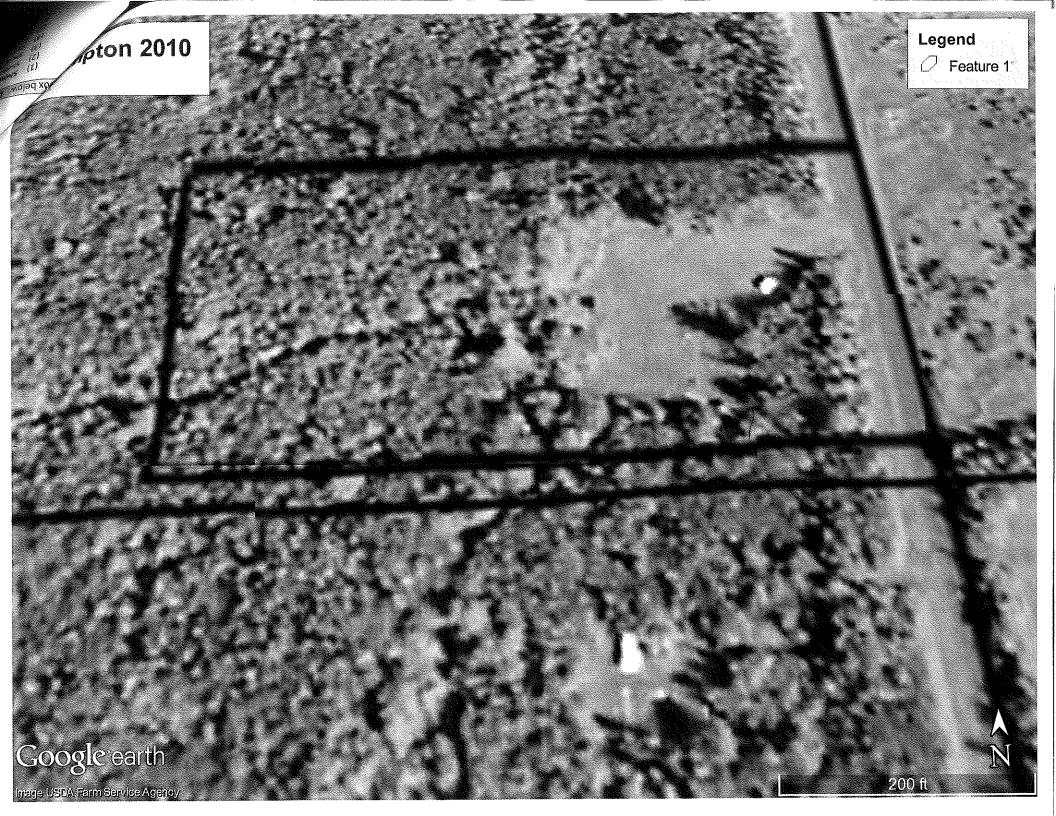
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Owners listed on the Defd \underline{All} Owners must sign \underline{or} letter(s) of authorization must accompany this application)

Date

Date

Hold For Sanitary:	Signature of Inspector:	This pu	Date of Inspection: $4-27$	_ ~ ~	Was Parcel Legally Created Was Proposed Building Site Delineated	Granted by Variance (B.O.A.)	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	Permit #: 16-00	Permit Denied (Date):	(9) Stak	other previously surveyed corner Prior to the placement or constru- one previously surveyed corner to marked by a licensed surveyor at	Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure with	Setback to Septic Tank Setback to Drain Field	Setback from the East Lot Line	Setback from the West Lot Line	Setback from the North Lot Line	Setback from the Estat	Setback from the Centerline of Platted Road	De	(8)	Please complete (1		 university of the second secon			(3) Show I (4) Show: (5) Show: (6) Show a (7) Show a	(1) (2)
Hold For TB):	an deni	; <i>></i> +	mittee or Board Conditions Attached?	Exited By	N N N N N N N N N N N N N N N N N N N	Case #:	Lot		Issuance information (County Use Chiy) Permit Denied (Date):	e or Mark Proposed Love NOTICE: All Land Use The Construction Of New O The lo	red corner or marked by a ficensed surveyor a or construction of a structure more than ten d corner to the other previously surveyed cor urveyor at the owner's expense.		Tank or Holding Tank Field	FOI Tine	t Lot Line	h Lot Line	blished Right-of-Way	erline of Platted Road	Description	Setbacks: (measured to the closest point)	complete (1) (7) above (prior to continuing)					Location of (*): any (*):	Location of: / Indicate:
Hold For Affidavit.		marg	pected by:	bount box	□ No		(Pused/Contiguous Lot(s)) No	Permit Date: 9.	Reason for Denial:	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits. Sanitary Number: # of bedrooms: Sanitary Date:	her previously surveyed corner or marked by a licensed surveyor at the owner's expense. For to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense.	reet (10) feet of the minimum required setback,	Feet Feet	Teet.	Feet	Feet	Feet	Feet	Measurement	closest point)	ntinuing)					(*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	Proposed Construction North (N) on Plot Plan
Affidavit:	0	placer	If No they need to be attack	social is organ		Previouslý Granted		2/6	none	ction, Septic Tank (ST), Different the Date of Issuance ALL Municipalities Are Region or Federal agencies may	t from the minimum required setb by use of a corrected compass fro	the boun	et Setback to Well	et Elevation of riocapiain						°© ∂						e Road (Name Frontage I ir Property (5T); (*) Drain Field (DF); I/Creek; or (*) Pond ver 20%	of what you are applying for) tion lan
Hold For Fees:		tene in	ach:	rest of	nted I	Previouslý Granted by Variance (B.O.A.)	∃ □ Yes No			rain field (DF), Holding T if Construction or Use ha quired To Enforce The Un also require permits.	ack, the boundary line from which m a known corner within 500 feet	dary line from which the setback must be measured must be		oapiain	on property	/etland	Setback from the Bank or Bluff		Description	Changes in plans must be approvi						Road) (*) Holding Tank (HT) a	
7. 87	Data of Approva	I was bon	Re-I	Zohing District Lakes Classification	` (Yes □ Yes	Case #:	Affidavit Required Affidavit Attached			ank (HT), Privy (P), and I so not begun. If orm Dwelling Code.	the setback must be measured m	visible from one previously			□Yes			high-water mark)	Me	approved by the Planning & Zoning Dept.						nd/or (*)	
16		λ)n:	(1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Ano		□ Yes \□No □ Yes \□No			<u>well</u> (w).	ure, or must be	surveyed corner to the	Feet	reet		Feet	Feet	Feet	Measurement	s & Zoning Dept.				 			



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

amp (Received) GE.

			Approximations.	
:				
Refund:	Amount Paid:	Date:	Permit #:	\$ 9-6-16 \$ 75.
	9-10-110 91-10-100 81-10-100	9-31/6	16-0398	\$ 75 CK \$444
	33			444

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. SEP 082016

					Municipal Use				Commercial Use				A Residential Use				T Opcoord	Dronnsed I Ise	Proposed Construction:	Existing Structure: (if permit being applied for is relevant to it)	***************************************				\$75.000	•	9000	Value at Time of Completion * include donated time & material	Non-Shoreland	onorelatio —		Section	Santa.	<u>> 1/4</u>	PROJECT LOCATION		Authorized Agent: (Person Signing Application)	Contractor:	Address of Property.	100 m	Owner's Name:	TYPE OF PERMIT REQUESTED	TO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO AP TRANSITION (A). ZOTION DANS
]		Τ.	□			Use				USe					6	uction:	e: (if permit be		Property	☐ Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	☐ Addition/Alteration	New Construction	Project		☐ Is Proper	☐ Is Proper Creek or La	J , Township			Legal Description:		Person Signing App	1. Kova	ところ	COMMO	>	REQUESTED -	STITION UNTIL A
Other: (explain)	Condition	Special Us		Accessory	Accessory Building	Addition/	Mobile Ho	Bunkhous							Kesidence	Principal	,			eing applied foi			siness on	(existing bldg)	on	/Alteration	struction	lect		ty/Land within	☐ Is Property/Land within 300 feet of R Creek or Landward side of Floodplain?	7	į	Gov't Lot			ation	I BY	2		329	► X 'IANDUSE	ll Permits Hav
plain)	Conditional Use: (explain)	Special Use: (explain)	c	Building Addit	Building (spe	Addition/Alteration (specify)	Mobile Home (manufactured date)	Bunkhouse w/ (☐ sanitary, or	with Attached Garage	with (2 nd) Deck	with a Deck	with (2") Porch	with a Porch	WITH LOTE	Residence (i.e. cabin, nunting snack, etc.	Structure (first				r is relevant to it)	SIGD			Basement	· I	☐ 1-Story + Loft	X 1-Story	# of Stories and/or basement		1000 feet of Lak	300 feet of River	N, Range	,	Lot Lot(s)	(Use Tax Statement)		on behalf of Owner(s)	PNOT		24	"' [S	USE T SAN	E BEEN ISSUED TO
				Altera		cify)			d Garage	*	The section of the se	Ch			urig stidek, etc.)	Principal Structure (first structure on property)		Proposed Structure	Length:	Je ngth:			lat.			×.	☐ Seasonal	ent Use		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	Is Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yes.—continue —	₩	Town of:	∑	04- 369!	DENI- (22 diviso)	Agent Phone:	Contractor Phone: レギコーの子体の	MASO 1	29745-E	Mailing Address:	SANITARY PRIVY	PERMINACO
				(specify)	Nt mac e			uarters, <u>or</u> □								perty)		Structure		6			25		\dashv	lound	nal			₩		Byston	n of:	& Page	57		Agent	-	6	1_		יישואַ עפון וויאַ ועפּוּ	Zanina De
								cooking & f															None None		3	2	P	# of bedrooms	-	tance Struct	tance Struct	1		Lot(s) No.			Mailing Addı	er:	7	Ondosygon	City/s	CONDITIONAL USE	2
		444000000000000000000000000000000000000	The second secon		The second secon	10 day		\square sleeping quarters, or \square cooking & food prep facilities)						***************************************					Width:	Width: 40	None	☐ Compost Toilet	1	☐ Privy (Pit)	☐ Sanitary (Exists) Specify Type:		☐ Municipal/City	Sew		Distance Structure is from Shoreline : fee	Distance Structure is from Shoreline :			Block(s) No.			Agent Mailing Address (include City/State/Zip):		958	Ashla	ㅎ	USE SPECIAL USE	
		_						s) ((_	_			-	ar		,	D				ilet	/service cor	or :: Vau	(ists) Spec		City	What Type of Sewer/Sanitary System Is on the property?		eline : feet	eline : feet		Lot Size	Subdivision:		Recorded	tate/Zip):			lanch W	a rs	IAL USE	
×	×	×		×	3	×	×	×	×	×	×	×	×	; >	< >	< ×	<	Dimensions	Height:	Heig			itract)	ited (min 200 gallon)	ify Туре:	Specify Type:		pe of ry System operty?		. □ Yes	Is Property in Floodplain Zone?			2.	162	Document:	> <	סר		1.5.4%	-	□ B.O.A.	
_	_	_		4	_	<u> </u>	_)		_	_	- -	_	- -	- -	- -			nt:	Height: 30,44				00 gallon	111111111111111111111111111111111111111					U 05	ty in Zone?	5.528	Acreage		Page(s)	Yes :	Written Au Attached	Plumber Phone:		Cell Phone:	_ `		
				1	00 H.C.												Footage	Square		15.6				NA	23	_ □ Well	□ City	Water		Z\ No Yes	Are Wetlands Present?	28			162 Page(s) 170	No No	Written Authorization Attached	hone:		4531	15-682	꿈	

Owner(s): _ FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable tige for the purpose of inspection. (If there are Multiple Owners listed on the on the feed All Owners must sign or letter(s) of authorization must accompany this application) Date 9-6-

Authorized Agent:

Address to send permit

Date

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

			Tonigh Rd.
Date of Inspection Condition(s):Town Condition(s	Issuance Information (County Use Only) Permit Denied (Date): Permit # // -0.24/3 Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Pes (Fused/orly) Is Parcel in Common Ownership Pes (Fused/orly) Is Pes (Fused/orly)	Please complete (1) – (7) above (prior to (8) Setbacks: (measured to t) Description Description Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line Setback to Drain Field Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten other previously surveyed corner to the other previously surveyed marked by a licensed surveyer and the owner's expense. (9) Stake or Mark Proposed NOTICE: All Land U For The Construction of Ne	Verence Constitution of the Constitution of th
(11 2 U/ C = 1 = 1	ssuance Information ermit Denied (Date): *ermit Denied (Date): *ermit #: // - O34 Is Parcel a Sub-Stance Is Parcel in Common Owner Is Structure Non-Common Is Structure Non-Common Is Structure Non-Common Is Parcel Is Non-Common Is Parcel Is Non-Common Is Parcel Is Non-Common Is Non	omplete (8) So (8) So om the E om the So om the So	
E Committee Committee	ssuance Information (County Use Permit Denied (Date): Permit #: // - AS4S Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Years Is Non-Conforming Years I	lease complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest (8) Setbacks: (measured to the closest Description D	Show Location of: Show Location of: Show Location of (*): Show: Show: Show any (*): Show any (*):
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Board Conditions of the Market Por TBA: [es (Deed of es (Fused)) es (Pused) es (Fused) es d Ares	rrior to cor ad to the ad to the d Road d Road -Way -Way within ten (10) within ten (10) within ten (10) y surveyed to y surveyed to posed Lo I Land Use	Proper Nort (*) DAILE
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Dected Pected	Sanitary Number: Reason for Denial: Permit Date: Output Us Lot(s)) The state of t	the closest point) Measurement Measurement Measurement MA MA F MA MA	operty (regardless of w Proposed Construction (*) Driveway and (*) Fro All Existing Structures o (*) Well (W); (*) Septic (*) Wetlands; or (*) Sio
For A T		ment Feet Feet Feet Feet Feet Feet Feet	Show Location of: Show Location of: Show / Indicate: Show / Indicate: Show Location of (*): Show Location of (*): Show: Show: Show: Show: Show: Show: Show any (*): Show a
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Date of Re-Inspection: Date of Re-Inspection: REDUCTO In Date of Approval: Date of Approval: Date of Approval:	T)	pproved by the Planning & Zoning Dept. Weasurement Feet Feet Feet Feet Feet Feet Feet	
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